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BIBDATASHEET

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APPLICANTS									
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** CONTINUING DATA **********************************									
** FOREIGN APPLICATIONS ************************************									
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/22/2001									
Foreign Priority claimed yes no				STATE OR	SH	SHEETS TO		ΓAL	INDEPENDENT
35 USC 119 (a-d) conditions met yes no Met after Allowance Verified and Acknowledged Examiner Signature Initials				COUNTRY CA		DRAWING CLA 8 4		IMS 1	CLAIMS 7
ADDRESS 28875 Zilka-Kotab, PC P.O. BOX 721120 SAN JOSE, CA 95172-1120									
TITLE System and method for certifying that data received over a computer network has been checked for viruses									
☐ All Fees									
	1.16 Fees (Filing)								
	No	Authority has been give	n in Pape lit DEPOS	er SIT ACCOUNT		☐ 1.17 time)	Fees (F	² rocess	sing Ext. of
RECEIVED 1408	No	for following:				Fees (I	ssue)		
		Other							
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